California State Preschool Program (CSPP) Subcontract Approval Request (SAR)

A written subcontract is required for all service agreements unless otherwise exempt. All subcontracts, including subcontracts related to the purchase of equipment, building improvements, or renovations and repairs, are subject to the requirements in the annual Contract Terms and Conditions. For subcontracts that require the purchase of equipment, contractors are also required to follow Equipment Purchase Approval Request (EPAR) procedures set forth in the annual Contract Terms and Conditions.

To determine if a subcontract is required: Once the contractor stops paying for the item (annually, biannually, monthly, etc.) is there a tangible item that is left with the agency? If the answer is no, then it is likely that the purchase will require a subcontract.

Part I – CSPP Contractor Information

Contractor Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Contact Person: _____ Contact Phone Number: _____

Email: _____

Please indicate whether this request is for a public agency or private agency:

- ◯ Private Agency
- ◯ Public Agency - If marked, does your agency opt in to California Uniform Public Construction Cost Accounting Act (CUPCCAA):
  - ◯ Yes
  - ◯ No

Part II – Subcontractor Information

Name of Vendor Selected for Subcontract: _____

Street Address: _____

City: _____ State: _____ Zip Code:

Contact Person: _____ Contact Phone Number: _____

Part III – Subcontract Period

Proposed Start Date: _____

Proposed End Date: _____

Part IV – Scope of Work

If services will occur at multiple center locations, list each site and the corresponding work below:

Location/Site	Description of Work/Services Performed

If the subcontract is related to the purchase of equipment, building improvements, or renovations and repairs, are pictures attached to this approval?

- ◯ Yes
- ◯ No

Please indicate whether this request is for a multi-year plan or single-year plan**:**

- ◯ Multi-year Plan
- ◯ Single-year Plan

Part V – Total Subcontract Amount

Funding Stream/Program	Amount Allocated	Notes (Optional)

Total subcontract amount or not-to-exceed amount:

Please indicate whether this request includes a bid by checking the box below:

- ◯ Yes
- ◯ No

If yes, attach a bid or estimate with prices for equivalent and comparable items and/or services.

PART VI – Equipment (If Applicable)

Will any unit of equipment in excess of $10,000 requiring approval be purchased in relation to this subcontract?

- ◯ Yes
- ◯ No

Part VII – Certification: I certify that the information provided above is true and accurate to the best of my knowledge. I also agree to comply with the Contract Terms and Conditions including all required provisions under the California Code of Regulations, Title 5, Section 17802.

Signature of Authorized Representative: _____

Title: _____

Date: _____

Part VIII – For CDE Use Only

EED receipt date: _____

Contractor notification date: _____

- ◯ Approved
- ◯ Denied

Comments:

Consultant: _____ Date: _____

Administrator: _____ Date: _____